



PTO/SB/21 (02-04) (AW 02/2004)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 121

Application Number	10/725,650
Filing Date	December 2, 2003
First Named Inventor	Wenguang Ma et al.
Art Unit	1771
Examiner Name	Hai Vo
Attorney Docket No.	ALCN-101US2

**ENCLOSURES (Check all that apply)**

- ☒ Fee Transmittal Form  
☐ Fee Attached
- ☒ Amendment/Reply  
☐ After Final  
☐ Affidavits/Declaration(s)

- ☒ Extension of Time Request
- ☐ Express Abandonment Request
- ☒ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/  
Incomplete Application
- ☐ Response to Missing Parts under  
37 CFR 1.52 or 1.53

- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a  
Provisional Application
- ☐ Power of Attorney, Revocation,  
Change of Correspondence  
Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) \_\_\_\_\_

- ☐ After Allowance Communication  
to Group
- ☐ Appeal Communication to Board  
of Appeals and Interferences
- ☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply  
Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please  
identify below): PTO/SB/08a &  
PTO/SB/08b (11 pgs.), PTO-  
Form 2038, Copies of 11  
References, Return Receipt  
Postcard

**Remarks:****SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm or Individual Name	Jonathan H. Spadt	Registration No. (Attorney/Agent)	45,122
Signature			
Date	October 13, 2005		

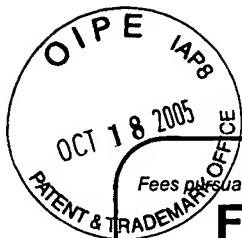
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Typed or printed name	Linda J. Remer		
Signature		Date	October 13, 2005

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Effective on 12/08/04.  
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1200.00

## Complete if Known

Application Number	10/725,650
Filing Date	December 2, 2003
First Named Inventor	Wenguang Ma
Examiner Name	Hai Vo
Art Unit	1771
Attorney Docket No.	ALCN-101US2

## METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =	x	=		Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 3 Month Extension of Time 37 CFR 1.17 (a)(3)

Information Disclosure Statement 37 CFR 1.17 (p)

Fees Paid (\$)

\$1020

\$180

## SUBMITTED BY

Complete (if applicable)

Signature	<u>Jonathan H. Spadt</u>	Registration No. Attorney/Agent	45,122	Telephone	610.407.0700
Name (Print/Type)	Jonathan H. Spadt	Date	October 13, 2005		

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